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POWER OF ATTORNEY TO PROSECUTE APPLICATIONS BEFORE THE USPTO I hereby revoke all previous powers of attorney given in the application identified in the attached statement under 37 CFR 3.73(b). i hereby appoint: 01473 Practitioners associated with the Customer Number Practitioner(s) named below (if more than ten patent practitioners are to be named, then a customer number must be used). Nume Registration Number Number as afformity(s) or agent(s) to represent the unmersioned before the timbed States fraters and Trademain Office (USPTO) in contribute with any and all patent applications assigned only to the undersigned according to the USPTO assignment records or assignment documents attached to this form in accordance with 37 CFR 3.73(b). Please change the correspondence address for the application identified in the attached statement under 37 CFR 3.73(b) to V 01473 The address associated with Gustoniar Number: OR 1000 DS individual Name Address State Country Telephone Assignee Name and Address: BioSante Pharmaceuticals, Inc. 111 Barclay Boulevard, Lincolnshire, IL 60069

A copy of this form, together with a statement under 37 CFR 3.73(b) (Form PTO/SBR9 or equivalent) is required to be filled in each application in which his form is used. The statement under 37 CFR 3.73(b) may be completed by one of the practitioners appointed in this form if the appointed practitioner is authorized to act on behalf of the assignee, and must identify the application in which this Power of Attorney is to be filed.

SIGNATURE of Ausignee of Record The individual whose signature and title is supplied below is authorized to act on behalf of the assignee		
Signature	My & Down	Date \$\13/1#
Name	THEFT I DOUGHOUSEN	Telephone X 45.499- 0100
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